# FORM (RF-3)

### **SUMMARY SHEET**

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **	
	Automobile Liability Private	voidine (minors)		
	Passenger			
	Commercial			
	Automobile Physical Damag			
	Private Passenger		•	
	Commercial			
	Liability Other Than Auto			
	Burglary and Theft			
	Glass			
	Fidelity	<del></del>		
	Surety			
	Boiler and Machinery			
	Fire			
).	Extended Coverage			
	Inland Marine			
	Homeowners			
	Commercial Multi-Peril	<del></del>		
·.	Crop Hail			
	Other COMM. PACKAGE	598,585	+2.0	
•	Life of Insurance	390,363	+2.U	
	Does filing only apply to certa Classes? If so, specify:	ain territory (territories) or	certain	
	Brief description of filing. (If	filing follows rates of an a	dvisory	
	Organization, specify	J	•	
	organization):	THIS FILING ADOPTS	S ISO'S REVISED COMMERCI	
	PACKAGE MODIFICATION FACTORS AS CONTAINED IN ISO FILING REFERENCE NUMBE			
	ML-2010-RLA1.			
	*Adjusted to reflect all prior ra **Change in Company's pren rates.		It from application of new	
	iacs.	AMERISURE INSI	JRANCE COMPAN	
			me of Company	
		SENIOR COMPLIA	• •	

# FORM (RF-3)

### **SUMMARY SHEET**

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability	Private	
Passenger		
Commercial		
Automobile Physica	Damag	
Private Passenger		
Commercial		
Liability Other Than	\uto	
Burglary and Theft		
Glass	·	
Fidelity		
Surety	**************************************	
Boiler and Machiner	-	
Fire	**************************************	
<b>Extended Coverage</b>		
Inland Marine		
Homeowners		
Commercial Multi-Pe	ril	
Crop Hail		
Other COMM. PACKAC	E 40,116,771	+2.0
Life of Insura	nce	
Does filing only app Classes? If so,	to certain territory (territories)	or certain
specify:		
Brief description of t	ling. (If filing follows rates of ar	n advisory
Organization, specif		
organization):	· · · · · · · · · · · · · · · · · · ·	PTS ISO'S REVISED COMMERCIA
PACKAGE MODIFICAT	ON FACTORS AS CONTAINED IN	ISO FILING REFERENCE NUMBER
ML-2010-RLA1.		······································
	Il prior rate changes.	
•	ny's premium level which will re	sult from application of new
rates.		
		IUTUAL INSURANCE COMPAN
	1	Name of Company

SENIOR COMPLIANCE ANALYST

### FORM (RF-3)

#### **SUMMARY SHEET**

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery	· · · · · · · · · · · · · · · · · · ·	
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail	·····	**************************************
Other Commercial Farm Life of Insurance	\$1,076,789	3.3%
Does filing only apply to certain Classes? If so,	in territory (territories) or o	certain
specify: No		
Brief description of filing. (If fi Organization, specify	ling follows rates of an ac	fvisory
organization):	We are increasing Loss Co	st Multipliers for coverages A to J.
Information on the RF-3 is estimated.		
*Adjusted to reflect all prior ra **Change in Company's prem		t from application of new
rates.	Consolidated	Insurance Company
RECEIVE	Nan	ne of Company
		ate Filings Sr. Analyst
.IUN 1 0 2010		Official – Title

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Change in Company revision effective	r's premium or rate level produced re 10.01.2010	by rate
(1)	(2) Annual Premium	(3) Percent
Coverage	<pre>Volume (Illinois)*</pre>	<u>Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical 1	Damage	
Private Passenger Commercial		
3. Liability Other Than	Auto	
<ol> <li>Burglary and Theft</li> </ol>		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
<ol> <li>Commercial Multi-Per</li> <li>Crop Hail</li> </ol>		
14. Crop Hall 15. Other Other Liabilit	y 1,327,101	7.9%
15. Other Other Brabilit	y 1,327,101	Estimated Illinois % Change
If so, specify: N/A	o certain territory (territories)o	r certain classes?
organization, specify or The rating manual for the Special Ir	ing. (If filing follows rates of ganization): surance Package (SIP) has been revised. Specific ity policies have been increased. The remaining co	ally, base rates for the Employment
	crease in Employment Practices Liability Policy crease in Lender Liability Policy	
The above changes result in an esti	mated overall 10.3% increase (countrywide) in SIP	premium.
<ul> <li>* Adjusted to reflect all prior rate</li> <li>** Change in Company's premium result from application of new rate</li> </ul>	level which will	
	CUMIS Insurance Soc	
	Name of Compa	any
	Brenda L. Simpson, Rate and For Official - Ti	

Cha	ange in Company's premium or rate	level produced by rate revision effective	November 1, 2010
	(1)	(2)	(3)
	(1)	Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
	Coverage	Volume (Initiols)	Change (1 of )
1.	Automobile Liability		
	Commercial		
2.	Automobile Physical Damage		
	Commercial		
3.	Liability Other Than Auto		_
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
	Other CMP - Package	1,835,391	+2.0%
	Line of Insurance		
Do	es filing only apply to certain territor	ry (territories) or certain classes? If so, specify:	
Brie		lows rates of an advisory organization, specify o	rganization):
	Adoption of ISO Package Revised	Modification Factors	
	djusted to reflect all prior rate chang		
**	Change in Company's premium leve	el which will result from application of new rates	•
		Employers Insu	rance Company of Wausau
		Na	me of Company
		Polly Becker S	Senior State Filings Analyst
			Official - Title

Chang	ge in Company's premium or rate	level produced by rate revision effective	November 1, 2010
	(1)	(2)	(3)
	(1)	Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1. A	automobile Liability		
	Commercial		
2. A	automobile Physical Damage		
	Commercial		
3. L	iability Other Than Auto		
	Surglary and Theft		
	Glass	2. V-12.00	
	idelity		
	Surety		
	Boiler and Machinery		
	ire		
	extended Coverage		
	nland Marine		
	lomeowners		***************************************
	Commercial Multi-Peril		
	Crop Hail		
	Other CMP - Package	10,431	+2.0%
13. 0	Line of Insurance	10,751	12.070
	Elife of Irisdiance		
Does	filing only apply to certain territor	y (territories) or certain classes? If so, specify	c
D003	iming only apply to certain territor	y (certicolles) of certain classes. If so, specify	•
Brief o	description of filing> (If filing follo	ows rates of an advisory organization, specify	organization):
	doption of ISO Package Revised N		organización.
	adopation 200 i destage i tevioca i	Tourisadori i decoro	1
*Adiu	sted to reflect all prior rate change	PC	
		which will result from application of new rate	S
<b>C.</b> 1	ange in company a premiam level	Which will result from application of field rate	J.
		The First Lib	erty Insurance Corporation
			ame of Company
		.,	one of company
		Polly Recker	Senior State Filings Analyst
		. Ony becker	Official - Title

# FORM (RF-3)

# **SUMMARY SHEET**

Change in Company's premium or ra	te level produced by rate revision
effective 06/10/2010	

	(1)	(2)	(3)
-	• •	Annual Premium	Percent
4	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger Commercial		
2	Automobile Physical Damag		
<b>£</b> .	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
<b>1</b> .	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Compak	5,241,658	-0.1%
	Life of Insurance		
•	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: No No		
	Brief description of filing. (If fi	iling follows rates of an a	advisory
	Organization, specify	LIOD Davidsian	
	organization):	HSB Revision	
	*Adjusted to reflect all prior ra	ite changes	
	**Change in Company's prem		alt from application of new
	rates.		• • • • • • • • • • • • • • • • • • • •
	•	Frankenmuth Mut	ual Insurance Company
			me of Company
		Shelly Hawes, R &	•

# FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by r		rate revision
effective 10/01/2010	•	
(1)	(2)	(3)
	Annual Premium	Percen

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Terrorism	43274	+100
	Life of Insurance		
•	Does filing only apply to cert Classes? If so, specify: No	tain territory (territories) or	certain
	Brief description of filing. (If Organization, specify organization):	_	dvisory  Insurance Company is submitting this
			ial Property for your review and approval.
	*Adjusted to reflect all prior **Change in Company's pre rates.		It from application of new
	Iales.	Greater New York	Mutual Insurance Company

Name of Company John Moylan - VP Commercial Lines Underwriting Official - Title

### FORM (RF-3)

#### **SUMMARY SHEET**

	(1) Coverage		(2) nnual Premium olume (Illinois) *	(3) Percent Change (+or-) **
Autom	obile Liability Pr	<del></del>	,, di 10 (11111010)	
Passe	•	TIVALC		
Comm	•	<del></del>		
	iobile Physical [	Jaman	<del></del>	
	e Passenger	Jamag		
Comm	•			
	y Other Than A			
	ry and Theft			
Glass	iry and their			
	.,	<u> </u>		
Fidelity				
Surety		<del></del>	<u> </u>	
	and Machinery			
Fire	1. 1.0			
	ded Coverage			
	Marine			
	owners	<del></del>		
	ercial Multi-Peri	il		
Crop F				
Other_	Commercial Farm		\$643,257	3.4%
	Life of Insuran	ıce		
Door	filing only apply	to cortain tor	ritory (territories) c	or cortain
	es? If so,	to certain ten	nory (territories) c	or certain
specif	•	No		
Specii	у.	140		
Priof	description of fili	ing (If filing f	ollows rates of an	advison
Dilei	nization, specify		JIOWS Tales of all	advisory
Organ			We are increasing Loss	Cost Multipliers for coverages A to .
		-	TVE are increasing 2005	Cost (vidicipliors for coverages / to t
organ	•	timatad		
organ	tion on the RF-3 is est	timated.		
organ Informa	tion on the RF-3 is est		anges	
organ Informa *Adjus	tion on the RF-3 is est	Il prior rate ch		ult from application of nev
organ Informa *Adjus **Cha	sted to reflect al	Il prior rate ch		ult from application of nev
organ Informa *Adjus	sted to reflect al	Il prior rate ch	evel which will res	ult from application of nev
organ Informa *Adjus **Cha	sted to reflect al	Il prior rate ch	evel which will res	sult from application of new na Insurance Company ame of Company

Official - Title

JUN 1 0 2010

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

### FORM (RF-3)

### **SUMMARY SHEET**

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		The state of the s
Fire		
Extended Coverage		<del></del>
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Terrorism	1507	+100
Life of Insurance		
Description and the second		
Does filing only apply to cert	tain territory (territories) or	cenain
Classes? If so,		
specify: No No		
Brief description of filing. (If	filing follows rates of an a	dvisory
Organization, specify	imig follows rates of all a	a v. 50. j
organization):	Insurance Company of Gr	eater New York is submitting this
filing for our revised independent terroris		· · · · · · · · · · · · · · · · · · ·
*Adjusted to reflect all prior i **Change in Company's pre		It from application of ne
rates.		and the second s
		ny of Greater New York
	Na	me of Company
	John Moylan - VP (	Commercial Lines Underwriting

Change in (	Company's premium or rate lev	vel produced by rate revision effective	November 1, 2010
	(1)	(2)	(3)
	(1)	(2) Annual Premium	Percent
	Coverne		Change (+ or -)**
	Coverage	Volume (Illinois)*	Change (+ or -)
1. Autom	obile Liability		
С	ommercial		
2. Autom	obile Physical Damage		
С	ommercial		
3. Liability	y Other Than Auto		
4. Burglai	ry and Theft		
5. Glass	_		
6. Fidelity	,		
7. Surety			
8. Boiler a	and Machinery		
9. Fire			
10. Extend	ed Coverage		
11. Inland	Marine		
12. Homeo	wners		
13. Commo	ercial Multi-Peril		
14. Crop H	ail		
15. Other	CMP - Package	36,106	+2.0%
•	Line of Insurance		
Does filing	only apply to certain territory (	(territories) or certain classes? If so, specify	/:
		s rates of an advisory organization, specify	organization):
Adopti	on of ISO Package Revised Mo	dification Factors	
*Adjusted t	to reflect all prior rate changes	•	
** Change	in Company's premium level w	hich will result from application of new rate	<b>'S.</b>
			Insurance Corporation
		N	ame of Company
		Polly Becker	Senior State Filings Analyst
			Official - Title

Change in Company's premium or rate level produced by rate revision effective		November 1, 2010	
(1)	(2) Annual Premium	(3) Percent	
Coverage	Volume (Illinois)*	Change (+ or -)**	
Automobile Liability     Commercial			
2. Automobile Physical Damage Commercial			
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other CMP - Package	1,134,804	+2.0%	
Line of Insurance			
Does filing only apply to certain territor	ory (territories) or certain classes? If so, specify	/:	
Brief description of filing> (If filing for Adoption of ISO Package Revised	ollows rates of an advisory organization, specify I Modification Factors	organization):	
walder and the medical all makes absent			
*Adjusted to reflect all prior rate char		_	
** Change in Company's premium lev	el which will result from application of new rate	25.	
	Liberty Mutu	al Fire Insurance Company	
		lame of Company	
	Dalla Baalaan	Carian Chata Filinga Analyst	
	Polly Becker	Senior State Filings Analyst	
		Official - Title	

Cha	inge in Company's premium or rate	level produced by rate revision effective	November 1, 2010
	(4)	(2)	(3)
	(1)	(2)	Percent
		Annual Premium	Change (+ or -)**
	Coverage	Volume (Illinois)*	Change (+ or -)
1.	Automobile Liability		
	Commercial		
2.	Automobile Physical Damage		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail	12 210	+2.0%
15.	Other CMP - Package	12,210	<del>+2.078</del>
	Line of Insurance		
<b>-</b>		- (territories) or contain classes? If so specifi	.,,
DO	es filing only apply to certain territo	ry (territories) or certain classes? If so, specifi	y
	of denotation of films. (If films fol	Harris makes of an advisory arganization specific	organization):
Brie		llows rates of an advisory organization, specify	organización).
	Adoption of ISO Package Revised	Modification Factors	
	ljusted to reflect all prior rate chan		
**	Change in Company's premium leve	el which will result from application of new rate	es.
			itual Insurance Company
		Ŋ	Name of Company
		Polly Becker	Senior State Filings Analyst
			Official - Title

Change in Company's premium or rat	te level produced by rate revision effective	November 1, 2010
(1)	(2) Annual Premium	(3) Percent Change (+ or -)**
Coverage	Volume (Illinois)*	Change (+ or -)
Automobile Liability     Commercial		
2. Automobile Physical Damage Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other CMP - Package	58,898	+2.0%
Line of Insurance		
Does filing only apply to certain territ	tory (territories) or certain classes? If so, speci	fy:
Brief description of filing> (If filing f Adoption of ISO Package Revise	ollows rates of an advisory organization, specify d Modification Factors	y organization):
*Adjusted to reflect all prior rate cha ** Change in Company's premium le	vel which will result from application of new rat	es. nsurance Corporation
		Name of Company
		наше от сотпрану
	Polly Becker	Senior State Filings Analyst
		Official - Title

### FORM (RF-3)

### **SUMMARY SHEET**

(1)	(2) Annual Premium	(3) Percent
Coverage	- Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		
Passenger	***************************************	
Commercial		
Automobile Physical Damag		•
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Commercial Farm	\$320,207	3.6%
Life of Insurance		
Does filing only apply to cer Classes? If so,	tain territory (territories) or	certain
specify: No No		
Brief description of filing. (If	f filing follows rates of an ac	tvisory
	i iiii g ronono rates er arrat	21.00.
Organization, Suectiv		
Organization, specify organization):	We are increasing Loss Co	st Multipliers for coverages A to J.
organization):	We are increasing Loss Co	est Multipliers for coverages A to J.
	We are increasing Loss Co	st Multipliers for coverages A to J.
organization): Information on the RF-3 is estimated.  *Adjusted to reflect all prior **Change in Company's pre	rate changes.	
organization): Information on the RF-3 is estimated.  *Adjusted to reflect all prior **Change in Company's pre	rate changes. mium level which will resul	t from application of new
organization): Information on the RF-3 is estimated.  *Adjusted to reflect all prior **Change in Company's pre	rate changes. emium level which will resul	t from application of new
organization): Information on the RF-3 is estimated.  *Adjusted to reflect all prior **Change in Company's pre	rate changes. emium level which will resul Peerless In Nar Roy Bebling S	t from application of new

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

### FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision
effective 10/01/2010

	(1)	(2) Annual Premium	(3) Percent
	Coverage	<ul><li>Volume (Illinois) *</li></ul>	Change (+or-) **
	Automobile Liability Private Passenger		
	Commercial Automobile Physical Damag Private Passenger		•
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
).	Extended Coverage		
١.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril	· · · · · · · · · · · · · · · · · · ·	
1.	Crop Hail		
5.	Other Terrorism	9711	+100
	Life of Insurance		
•	Does filing only apply to cert Classes? If so,	ain territory (territories) or	certain
	specify: No No		
	Brief description of filing. (If Organization, specify organization):	filing follows rates of an a	-
	•	m rule exception pages for Commerc	cial Property for your review and approval.
	*Adjusted to reflect all prior r **Change in Company's pre- rates.		ult from application of new

Strathmore Insurance Company

Name of Company John Moylan - VP Commercial Lines Underwriting

Change in Company's premium or rate level produced by rate revision effective		level produced by rate revision effective	November 1, 2010	
	(1)	(2) Annual Premium	(3) Percent	
	Coverage	Volume (Illinois)*	Change (+ or -)**	
1.	Automobile Liability			
	Commercial			
2.	Automobile Physical Damage Commercial			
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
	Extended Coverage			
	Inland Marine	- 4-		
	Homeowners			
	Commercial Multi-Peril			
	Crop Hail			
15.	Other CMP - Package	656,069	+2.0%	
	Line of Insurance			
Do	es filing only apply to certain territor	y (territories) or certain classes? If so, specify:		
	es filling only apply to certain territor	y (territories) or certain classes: If so, specify.		
Brie	ef description of filing> (If filing foll	ows rates of an advisory organization, specify of	organization):	
	Adoption of ISO Package Revised			
	<del></del> -			
	ijusted to reflect all prior rate chang			
**	Change in Company's premium leve	l which will result from application of new rates	<b>5.</b>	
			ness Insurance Company	
		Na	ame of Company	
		<b>_</b>		
			Senior State Filings Analyst	
			Official - Title	

Cha	ange in Company's premium or rate	level produced by rate revision effective	November 1, 2010	_
	(1)	(2)	(3)	
	(1)	Annual Premium	Percent	
	Coverage	Volume (Illinois)*	Change (+ or -)**	
	cove.uge	volume (2mmolo)	and igo (v or )	
1.	Automobile Liability			
	Commercial			
2.	Automobile Physical Damage			
	Commercial			
3.	Liability Other Than Auto			
4.	Burglary and Theft			Τ
5.	Glass			_
6.	Fidelity			_
7.	Surety			_
8.	Boiler and Machinery			_
9.	Fire			_
	Extended Coverage			_
	Inland Marine			_
	Homeowners			
	Commercial Multi-Peril		· · · · · · · · · · · · · · · · · · ·	_
				_
	Crop Hail	2.242.000	. 2 00/	_
15.	Other CMP - Package	2,242,960	+2.0%	_
	Line of Insurance			
	<del></del>	. () - () - () - () - () - () - () - ()		
DO	es filing only apply to certain territor	ry (territories) or certain classes? If so, specify:		_
				_
Brie		lows rates of an advisory organization, specify of	rganization):	
	Adoption of ISO Package Revised	Modification Factors		
				_
	fjusted to reflect all prior rate chang			
**	Change in Company's premium leve	el which will result from application of new rates	•	
		Wausau Under	vriters Insurance Company	
			me of Company	
		Polly Becker	Senior State Filings Analyst	
			Official - Title	_

### Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in company's premium or rate level produced	by rate revision effective	1/1/2011
(1) Coverage	( 2 ) Annual Premium Volume ( Illinois )*	(3) Percent <u>Change(+ or -)</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other P&C Agents Professional Liability	n/a	3.7%
Line of Insurance		
Does filing only apply to certain territory (territories) o	r certain classes? If so, spec	ify: No
· · · · · · · · · · · · · · · · · · ·		
Brief description of filing . ( If filing follows rates of an a	dvisory organization, specify	organization ):
Independent rate filing for Independent Insurance	e Agents Professional Liabilit	ty - Cook County
Independent rate filing for Independent Insurance	e Agents Professional Liabilit	y - Rest of State
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level which will r	esult from application of new	rates.
	Wes	tport Insurance Corporation,
		Name of company
	Cind	y Knoll, Compliance Specialist
	<del></del>	Official-Title

### Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in company's premium or rate level produce	ed by rate revision effective	1/1/2010
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume(Illinois)</u> *	(3) Percent <u>Change(+ or -)</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		<del></del>
6. Fidelity		
7. surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		-
14. Crop Hail		
15. Other P&C Agents Professional Liability Line of Insurance	n/a	3.7%
Does filing only apply to certain territory ( territories	) or certain classes? If so, specify :	No
Brief description of filing . ( If filing follows rates of a Open Brokerage Coverage Unit for Profession Open Brokerage Coverage Unit for Profession	nals - Cook County	anization ):
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level which w	ill result from application of new rate	es.
	Westport	t Insurance Corporation,
		lame of company
	Cindy Kn	oll, Compliance Specialist
	Sindy Kill	Official-Title
		Omolai- Huc